PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

5725.040 \ -01

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			22					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		. 2			X\$ 9=		OR	X\$18=	34	
INDEPENDENT CLAIMS			minus 3 =		. 2			X40=		OR	X80=	140	
MU	LTIPLE DEPEN	DENT CLAIM PI	ESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "C					r "0" in c	olumn 2	l	TOTAL		OR	TOTAL	904	
CLAIMS AS AMENDED - PART II								CMALL ENTITY OF			OTHER THAN SMALL ENTITY		
					umn 2) (Column 3)			SMALL ENTIT		OR I	SWALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM		┚╽	+135=		OR	+270=		
								TOTAL ADDIT. FEE		ا	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)		AUDII. FEE			ADDIT: 1 EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA		RATE_	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	F.CL AINA	=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
BEST AVAILABLE					COPY			TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)_						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u> </u> =		X40=	1	OB	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM					OR			
* If the order in returns 4 is less than the order in solution () units #0" in solution ()										OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													